## UTILITY

Attorney Docket No. 1760-**284 289** 

PAIENI APPLICATION	First Inventor Richard L		LESKE	<u>_</u>
TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Title Cotton	Cultivar 00X01BR		.s. 2286
	Express Mail L	abel: EV211173912	US	9/Q
Assignee Information: D&PL Ted	hnology Holding	Corporation		195
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent appli		ADDRESS TO:	Assistant Commission Box Patent Application Washington, D.C. 20	oner of Patents ion
1. X Fee Transmittal Form (Submit an original, and a duplicate for fee 2. Applicant claims small entity status 3. X Specification Total pages (preferred arrangement set forth below) - Descriptive title of the invention - Cross references to Related Apple - Statement Regarding Fed sponse - Reference to sequence listing, a computer program listing append - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings - Detailed Description - Claims - Abstract of the Disclosure  4. Drawing(s) (35 USC 113) (Total States of the Disclosure  Drawing(s) (35 USC 113) (Total States of the Disclosure)  Drawing(s) (35 USC 113) (Total States of the Disclosure)  i Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Botal Deletation (100 per prior application)  i DELETION OF INVENTORS (100 per prior application)  Signed statement attached deletation (100 per prior application)  Application Data Sheet.	ications ored R&D table or a ix  Sheets) [ ] tges) [ 2] tcopy) the copy of the	or Comput  8. Nucleotide and a.	ent verifying identity  NYING APPLICATION  Ent Papers (cover short (a) Statement  The is an assignee)  Instation Document (a) Disclosure Statement  The County of Priority Document (a) Disclosure (b)  The County of Priority Document (b)  The County of Count	uence Submission (CRF) on: pies); or of above copies ON PARTS eet & document(s))  (if applicable) ent /PTO 1449  P 503) ment(s). r 35 U.S.C.
17: If a CONTINUING APPLICATION, check	k appropriate box an		oress Mail Certificate	EV211173912US
application Data Sheet under 37 CFR 1.76::  Continuation Divisional Prior application information: Examiner For CONTINUATION OR DIVISIONAL APPS only: Tunder Box 5b, is considered a part of the disclosure of reference. The incorporation can only be relied upon to the contract of the disclosure of the	Continuation-	in-part (CIP) of prior	or application No.:  Group/Art Unit  m which an oath or decla	incorporated by
Customer Number or Bar Code Label	32905			
Address Jondle & Associates PC 9085 East Mineral Circl				
City Centennial Sta	nte	со	Zip Code	80112
Country U.S.A. Tel	ephone	303-799-6444	Fax	303-799-6898
Name Robert J. Jondle, Ph.D	17			
Signature Solution	ll		Date July 17, 200	13

G N N C		Complete if Known			
<u> </u>	Application Number	10/			
FEE TRANSMITTAL	Filing Date				
for FY 2003 (Large Entity)	First Named Inventor	Richard LESKE			
(Edigo Eliaty)	Examiner Name				
	Group Art Unit				
Total Amount of Payment \$874.00	Attorney Docket Number	1760-289			

The Commissioner is hereby authorized to charge additional fees and credit any overpayment to Depost Account Number 50-2368 in the name of Jondle & Associates P.C.    Code	METHOD OF PAYMENT (check one)		FEE (	CALCU	LATION (continued)		
Additional fees and credit any overpayment to Deposit Account Number 50-2368 in the name of Jondle & Associates P.C.   1051   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130   130	1. X The Commissioner is hereby authorized to charge		3. ADDITIONAL FEES				
Jondle & Associates P.C.   1051   130   Surcharge - late filling fee or coath			Fee	Fee			
1052   50   Surcharge - late provisional filing fee   1   1   1   1   1   1   1   1   1	Deposit Account Number 50-2368 in the	name of	Code	Paid		Fee Paid	
1052   50   Surcharge - late provisional filing fee   1   1   1   1   1   1   1   1   1	Jondle & Associates P.C.		1051	130	Surcharge - late filing fee or oath	[ ]	
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Applicant claims small entity status	Charge any Additional Fee Required Under	er			or cover sheet	-	
Applicant claims small entity status		C.		130	Non-English specification	[ ]	
Applicant claims small entity status	or or the and the			2,520		[ ]	
2. ☑ Payment Enclosed	Applicant states and the state		1804	920	Requesting publication of SIR	[ ]	
2.	Applicant claims small entity status						
Check			1805	1,840*		[ ]	
1252	Payment Enclosed						
1252	X Check				Extension for reply within first month	[ ]	
1254 1,450						[ ]	
Total Claims   2   2   3   3   2   3   3   2   3   3	Credit Card					[ ]	
1. FILING FEE						[ ]	
1. FILING FEE	FEE CALCULATION				Extension for reply within fifth month	[ ]	
1403						[ ]	
Fee	1. FILING FEE					[ ]	
Code   S   Fee Description   Fee Paid   1451   1,510   Petition to Institute a public use proceeding   1   1001   750   Utility filling fee   [750.00 ]   1453   1,300   Petition to revive -unavoidable   [ ]   1002   330   Design Filing Fee   [ ]   1501   1,300   Design issue fee   [ ]   1502   470   Design issue fee   [ ]   1503   630   Path Filing Fee   [ ]   1503   630   Path Filing Fee   [ ]   1460   130   Petition to revive -unintentional   [ ]   Design issue fee   [ ]   Design issue fee   [ ]   Design issue fee   [ ]   Petition to revive -unintentional   [ ]   Pe						[ ]	
1001   750		Paid				[ ]	
1002   330   Design Filing Fee						[ ]	
1003   520   Plant Filing Fee	[	~ i				[ ]	
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SUBTOTAL \$750.00   1807   50   Processing fee under 37 CFR 1.17(q)   [ ]		i				[ ]	
SUBTOTAL \$750.00  1806 180 Submission of Information Disclosure Statement [ ] 8021 40 Recording each patent assignment per property [40.00 ] (times number of properties)  Extra Claims Fee Fee Scattle Statement [ ] 1809 750 Filing a submission after final rejection [ ] (37 CFR .129(a))  Paid-	,	,				[. ]	
2. CLAIMS  Extra Claims Fee Fee Paid- Total Claims [ 20 ] - 20** = [ ] x \$18 = [ ] Independent Claims [ 4 ] - 3** = [1 ] x 84 = [ 84 ] Multiple Dependent Claims Torn number previously paid, if greater;  SUBTOTAL  Basic  Basic  Basic  And Basic  Ba	SUBTOTAL \$750	00			Processing fee under 37 CFR 1.17(q)	į į	
2. CLAIMS  Extra Claims Fee Fee  Claims Fee Fee  Paid- Total Claims [ 20 ] - 20** = [ ] x \$18 = [ ]	ODDIOIAL WIOO	.00			Submission of Information Disclosure Statement	[ ]	
Extra Claims Fee Fee  Claims F	2 CLAIMS		0021	40		[40.00]	
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Paid- Total Claims [ 20 ] - 20** = [ ] x \$18 = [ ]  Independent [ 20 ] - 3** = [ 1 ] x \$4 = [ 84 ]    Claims [ 4 ] - 3** = [1 ] x \$4 = [ 84 ]    Multiple Dependent Claims		<b>5</b>	1009	750		l j	
Total Claims [ 20 ] - 20** = [ ] x \$18 = [ ] examined (37 CFR 1.129(b))  Independent  Claims [ 4 ] - 3** = [1 ] x 84 = [ 84 ] 1802 900 Request for expedited examination [ ] of a design application  **or number previously paid, if greater;  **or number previously paid, if greater;  SUBTOTAL \$84.00  \$84.00  \$84.00  Examined (37 CFR 1.129(b))  1801 750 Request for continued Examination [ ] of a design application  1504 300 Publication fee for early, voluntary, or [ ] normal publication  1505 300 Publication fee for republication [ ] 1455 200 Filing application for patent term adjustment [ ] 1456 400 Request for reinstatement of term reduced [ ] 1814 110 Statutory Disclaimer Other fee (specify)  * Reduced by Basic Filing Fee Paid SUBTOTAL \$40.00	Paid.	ree	1810	750			
Independent Claims [ 4 ] - 3** = [1 ] x 84 = [ 84 ] 1802 900 Request for expedited examination [ ] Multiple Dependent Claims		, ,	1010	750		l j	
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Multiple Dependent Claims + 280 = [ ] of a design application  **or number previously paid, if greater;  *SUBTOTAL \$84.00  SUBTOTAL \$84.00  **Reduced by Basic Filing Fee Paid SUBTOTAL \$40.00		f 04 1			Request for expedited examination (RCE)	[ ]	
**or number previously paid, if greater;  1504 300 Publication fee for early, voluntary, or [ ] normal publication  SUBTOTAL \$84.00   1505 300 Publication fee for republication [ ] 1455 200 Filing application for patent term adjustment [ ] 1456 400 Request for reinstatement of term reduced [ ] 1814 110 Statutory Disclaimer Other fee (specify)  * Reduced by Basic Filing Fee Paid SUBTOTAL \$40.00			1002	300		L J	
**or number previously paid, if greater;  SUBTOTAL \$84.00  1505 300 Publication fee for republication [ ]  1455 200 Filing application for patent term adjustment [ ]  1456 400 Request for reinstatement of term reduced [ ]  1814 110 Statutory Disclaimer Other fee (specify)  * Reduced by Basic Filing Fee Paid SUBTOTAL \$40.00	Multiple Dependent Claims + 200 -	L	1504	300		r 1	
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SUBMITTED BY				Complete (if applicable)
NAME AND REG. NUMBER	Robert J. Jondle, Reg. No. 33,915			
SIGNATURE	Holes Godle	DATE	July 17, 2003	DEPOSIT ACCOUNT USER ID

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Robert J. Jondle Reg. No. 33,915

Kuly 18, 2003